

TRANSMITTAL FORM

Application Serial Number	09/821,507
Filing Date	March 29, 2001
First Named Inventor	Kaczmarczyk
Group Art Unit	2664
Examiner Name	John Shew
Attorney Docket No.	SNS-009
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Check Attached
<input checked="" type="checkbox"/> Copy of Fee Transmittal Form

<input checked="" type="checkbox"/> Amendment/Response
<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input checked="" type="checkbox"/> including Annotated and Replacement Sheets
[Total Sheets 8]

<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Form PTO-1449
<input type="checkbox"/> Copies of IDS
Citation Labeled C13

<input type="checkbox"/> Certified Copy of Priority Document(s)

<input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
<input type="checkbox"/> Computer Readable Copy
<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)

<input type="checkbox"/> Formal Drawing(s)

<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal

<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)

<input type="checkbox"/> Terminal Disclaimer

<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application

<input type="checkbox"/> Small Entity Statement

<input type="checkbox"/> CD(s) for large table or computer program

<input type="checkbox"/> Amendment After Allowance

<input type="checkbox"/> Request for Certificate of Correction
<input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences

<input type="checkbox"/> Appeal Brief (in triplicate)

<input type="checkbox"/> Status Inquiry

<input checked="" type="checkbox"/> Return Receipt Postcard

<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8

<input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> |
|--|--|---|

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 2nd day of March, 2005.


Jamie Crystal-Lowry
 Jamie Crystal-Lowry

CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
 Proskauer Rose LLP
 One International Place
 14th Floor
 Boston, MA 02110-2600
 Tel. No.: (617) 526-9600
 Fax No.: (617) 526-9899

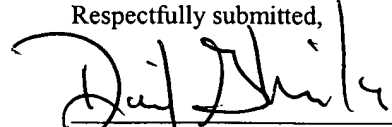
SIGNATURE BLOCK

Respectfully submitted,
David G. Miranda
 Date: March 2, 2005
 Reg. No.: 42,898
 Tel. No.: (617) 526-9620
 Fax No.: (617) 526-9899
 David G. Miranda
 Attorney for the Applicant(s)
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 One International Place
 14th Floor
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					Complete if Known				
					Application Serial Number		09/821,507		
					Filing Date		March 29, 2001		
					First Named Inventor		Kaczmarczyk		
					Group Art Unit		2664		
					Examiner Name		John Shew		
Attorney Docket No.		SNS-009							

METHOD OF PAYMENT					FEE CALCULATION (continued)				
<input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other					4. ADDITIONAL FEES				
					Large Entity	Small Entity			
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3081 <input checked="" type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.					Fee (\$)	Fee (\$)	Fee Description	Fee Paid	
<input type="checkbox"/> Applicant claims small entity status.					130	65	Surcharge - late filing fee or oath		
					50	25	Surcharge - late provisional filing fee or cover sheet		
					130	130	Non-English specification		
					2,520	2,520	Request for ex parte re-examination		
					120	60	Extension for reply within 1 st mo.	120	
					450	225	Extension for reply within 2 nd mo.		
					1,020	510	Extension for reply within 3 rd mo.		
					1,590	795	Extension for reply within 4 th mo.		
					2,160	1,080	Extension for reply within 5 th mo.		
					500	250	Notice of Appeal		
					500	250	Filing a brief in support of an appeal		
					1,000	500	Request for oral hearing		
					400	0	Petitions to the Director		
					180	180	Submission of IDS		
					790	395	Filing a submission after final rejection (37 CFR 1.129(a))		
					790	395	For each additional invention to be examined (37 CFR 1.129(b))		
					100	100	Certificate of Correction for applicant's error		
					110	55	Submission of Terminal Disclaimer		
					Other fee (Specify) _____				
					Other fee (Specify) _____				
					4. TOTAL: 120.00				

FEE CALCULATION				
1. BASIC FILING, SEARCH, AND EXAMINATION FEES				
Application Type	Filing	Search	Examination	Fee Paid
Utility	300	500	200	
Design	200	100	130	
Plant	200	300	160	
Reissue	300	500	600	
Provisional	200	0	0	
Small Entity Discount				
1. TOTAL				
2. EXCESS CLAIM FEES				
			Fee	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent.			50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent.			200	100
Total Claims	Extra Claims	Fee Paid (\$)		
- 20 or HP= _____ X \$50 = _____ HP = highest number of total claim paid for, if great than 20				
Indep. Claims	Extra Claims	Fee Paid (\$)		
- 3 or HP= _____ X \$200 = _____ HP = highest number of total claim paid for, if great than 3				
Multiple Dependent Claims	Fee(\$)	Small Entity fee (\$)	Fee Paid (\$)	
	360	180		
03/07/2005 CNGUYEN 00000013 503081 09821507 01 0.125 120.00 DA 2. TOTAL: _____				
3. APPLICATION SIZE FEE				
If the specification and drawing exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
Total Sheets	Extra Sheets	Additional 50 or fraction thereof	Fee (\$)	Fee Paid
-100 = _____ /50 = _____ round up to a whole number x _____ = _____				
3. TOTAL: _____				
CORRESPONDENCE ADDRESS				
Direct all correspondence to: Patent Administrator Proskauer Rose LLP One International Place, 14 th Floor Boston, MA 02110 Tel. No.: (617) 526-9600 Fax No.: (617) 526-9899				

SIGNATURE BLOCK	
Date: March 2, 2005 Reg. No.: 42,898 Tel. No.: (617) 526-9620 Fax No.: (617) 526-9899	Respectfully submitted,  David G. Miranda Attorney for the Applicant(s) Proskauer Rose LLP One International Place 14th Floor Boston, MA 02110-2600



Attorney Docket No.: SNS-009
(65672/019)

CFW 2664

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Kaczmarczyk
Serial No. : 09/821,507
Filed : March 29, 2001
Title : INTELLIGENCE ENGINE

Conf. No. : 5224
Art Unit : 2664
Examiner : John Shew

MAIL STOP AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE

In response to the Action mailed November 2, 2004, please amend the above-identified United States patent application as follows:

- **Amendments to the Specification** begin on page 2.
- **Amendments to the Claims** begin on page 9.
- **Amendments to the Drawings** begin on page 14.
- **Remarks** begin on page 15.
- An **Appendix** including amended figures is attached following page 16 of this

Amendment and Response.